

Express Mail Label No. EL623622645US

COMBINED DECLARAT	Fi	le No. 00-46							
(Includes Reference to PCT International Applications) As a below named inventor, I hereby declare that:									
My residence, post office			re as stat	ed below next to m	v name: I he	lieve that	Lam the original		
first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
MURINE CYTOKINE RECEPTOR									
the specification of which (check only one item below):									
is attached hereto was filed as United States application Serial No. on July 5, 2001									
and was amended on									
was filed as PCT international application Number on									
I hereby state that I have	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the								
claims, as amended by a	claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is								
material to the examinati	on of this applica	ation in acc	cordance	with Title 37, Code	of Federal I	Regulation	ıs, 1.56. I hereby		
claim foreign priority ben	efits under Title	35, United	States C	ode, 119 of any for	eign applica	tion(s) for	patent or		
inventor's certificate(s) o	r of any PCT inte	ernational	applicatio	n(s) designating at	least one co	untry othe	er than the United		
States of America listed certificate(s) or any PCT	below and nave	also identi	ried belov Lidosiana	v any toreign applic	ation(s) for i	oatent or II	nventors		
Angerica filed by me on the	ınıernalional app he same subject	matter ha	vina a filir	ing at least one co	of the applic	ation(s) of	f which priority is		
claimed:	ne same subject		virig a iiii	ig date belove that	or the applic	allori(o) o	, willow priority to		
PRIOR FOREIGN/PC	T APPLICATION	(S) AND A	NY PRIC	RITY CLAIMS UN	DER 35 U.S	.C. 119:			
C⊕UNTRY		ATION NU		DATE OF FILIN			ITY CLAIMED		
1.2						☐ YES			
						☐ YES	S NO		
						☐ YES	S □ NO		
I hereby claim the benefit under Title 35 United States Code 119(e) of any United States provisional application(s) listed									
below.	ICATION NILINA)			II C CII IN	IC DATE	 		
U.S. APPLICATION NUMBER				U.S. FILING DATE					
60/216,446	·			July 6, 2000					
									
I to a local plantage that the	- Ch Tale	05 11-4	- Chada	Codo 100 of or	الممانسان	10100 000	liention(a) or DCT		
I hereby claim the ber international application	nent under Hitle	35, United	eu States	America that is/ar	ly United S	nates app	ofar as the subject		
matter of each of the cla	s) designating the	cation is r	ot disclos	Amenica mai 15/an	ior applicati	nn(s) in th	e manner provided		
matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, 112, I acknowledge the duty to disclose material information as									
defined in Title 37, Code of Federal Regulations, 1.56 which occurred between the filing date of the prior application(s)									
and the national or PCT international filing date of this application:									
					CICALATINIC	TUELLO	EOD DENIEEIT		
PRIOR U.S, APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT U.S. APPLICATIONS STATUS (check one)									
U.S. APPLICATIONS U.S. APPLICATION NUMBER U.S. FIL				ING DATE	Patented	Pendin			
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PCT AP	PLICATIONS DE	SIGNATI	NG THE	U.S.					
PCT APPLICATIONS DESIGNATING THE APPLICATION FILING DATE U.S. SE			RIAL NUMBERS						
	2			IED (if any)					

				eby appoint the following att and Trademark Office conr	corney(s) and/or agent(s) to prosecute nected therewith.		
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	Residence	City		State or Foreign Country	Country of Citizenship		
	Post Office Address	Post Office Address		City	State & Zip Code/Country		
3]	Full Name	Family Name		First Given Name	Second Given Name		
<u>. 10</u> . 10	Residence	City	<u> </u>	State or Foreign Country	Country of Citizenship		
Ų.	Post Office Address	Post Office Address		City	State & Zip Code/Country		
4=	Full Name	Family Name		First Given Name	Second Given Name		
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5-	Full Name	Family Name		First Given Name	Second Given Name		
1.2	Residence	City		State or Foreign Country	Country of Citizenship		
	Post Office Address	Post Office Address		City	State & Zip Code/Country		
6.≟	Full Name	Family Name		First Given Name	Second Given Name		
	Residence	City		State or Foreign Country	Country of Citizenship		
	Post Office Address	Post Office Address		City	State & Zip Code/Country		
be tru impris	ue; and further that the	se statements were m er section 1001 of Title	nade with the know	ledge that willful false statements	s made on information and belief are believed to and the like so made are punishable by fine or false statements may jeopardize the validity of		
Signature of Inventor 1		Signature of Inventor 2		Signature of Inventor 3			
Date		Date		Date			
Signature of Inventor 4		Signature of Inventor 5		Signature of Inventor 6			
Date ·		Date		Date			